## PART B - FEE(S) TRANSMITTAL

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CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address)  36951 7590 03/01/2005				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.		
GREGORY LEE 824 E. IOWA AVI DENVER, CO 802		Ce I hereby certify that t States Postal Service addressed to the Ma	rtificate of Mailing or Tran	ismission  ng deposited with the United rst class mail in an envelope s above, or being facsimile		
03/11/2005 CNGUYEN1 00000017 10748858				Change of Les Kline (Depositor's name)		
1 FC:2501 700.00 OP 2 FC:1504 300.00 OP		·		03/07/05 (Signature)		
APPLICATION NO.	FILING DATE	• FIRST NAME		ENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/748,858	12/29/2003		Gregory Lee Kli	ngler		6436
TITLE OF INVENTION: S	AFE AUTO-LOCKING BE	LAY OVERRIDE	MECHANISM			
APPLN. TYPE	SMALL ENTITY	ISSUE FE	Е	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	nonprovisional YES			\$300	\$1000	06/01/2005
EXAMINER		ART UNIT		CLASS-SUBCLASS	_	
BUTLER, D	3683		188-065100			
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Custome Number is required.			(1) the names of up to 3 registered patent attorneys or agents OR, alternatively,  (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
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Please check the appropriate	e assignee category or catego	ries (will not be prir	nted on the patent)	: Individual G	Corporation or other private gr	roup entity Government
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Authorized Signature	Huroy &	te KK	<u> </u>	Date	03/07/05	-
Typed or printed name	Gregoly Le	e Klingle		Registration	, 1 No	
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